Form **8871** (July 2000)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Department of the Treasur

Pa	General Information			
1	Name of organization 7-	& Kalam H	Ki	Employer identification number
2	Mailing address (P.O. Box or number, stre	et, and room or suite num	nber) /	11-2070237
	City or town, state, and ZIP code	16 9671	2	
3			7	wn95@gte_net
4a	Name of custodian of records	4b Custod	ian's address	21
	Storia Gonzales	561	- WIE KE TH	K. Rd
(MICHINGIONSCIE		elein Hi	96712
5a	Name of contact person		t person's address	
	·		·	
	Jest Regents	16	elejwa, Hi 9	4712
6	Business address of organization (if differ	ent from mailing address s	shown above). Number, street, an	d room or suite number
	City or town, state, and ZIP code			
Pa	rt II Purpose			
7	Describe the purpose of the organization	I = I	$A \cup A \cup V$	1 Aug
	Describe the purpose of the organization Compary Compary	ittee TO K	elp elect hal	an. AK1
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D ₂	art III List of All Related Entitle	s (see instructions)		
8a		b Relationship	8c Address	
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For	r Paperwork Reduction Act Notice, see p	age 4.	Cat. No. 30405V	OG1387N, (1/24076)



Part IV 9a Name	LIST OF All Officers, D	96 Title	npensated Employees (see instructions) 9c Address
Ja Name		33 1110	66-030 Hapist
Kalm	ni AKi	Carridate	Haleina 141 96712
<u> LUCCO</u>			59-6/1E Ke TKi Rd.
11 . 11861	á Gonzales	- seasurer	Haleran, the 96712
× 110 · 15	3. 0/01/2009	7 (01001111)	58.335 Namaó Pl.
10 1	nezems_	Lamonium Mk	2) Halpiwa, thi 96712
<u>, je 1 : .</u>	3	Confidence	
	10-11-11-1		
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he Trade and the Control of the Cont			
	Under penalties of perjury, 1 de	eclare that the organization named	n Part I is to be treated as an organization described in section 527 of the Internal companying schedules and statements, and to the best of my knowledge and belief,
	it is true, correct, and complete		6/1/2
Sign			\$/1/00 Date
Here	Signature of authorized	official	, , , , ,
		Printed of	n recycled paper Form 8871 (7-2000